

Fill in this information to identify your case and this filing:

Debtor 1	<b>JOSE</b>	<b>LUIS</b>	<b>REYES AYALA</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<b>CHIARELIS</b>		<b>RIVAS TORRES</b>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: District of <u>Puerto Rico</u>			
Case number	<u>24-04556-11</u>		

Check if this is an amended filing

## Official Form 106A/B

### Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

##### 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

No. Go to Part 2.

Yes. Where is the property?

1.1 **2 STORY CONCRETE PROPERTY WITH 2 BEDROOMS AND 2 BATHROOMS**

Street address, if available, or other description

BO CAGUITAS LKM 2 SR 777 INT

Aguas Buenas, PR 00703

City      State      ZIP Code

Aguas Buenas

County

**What is the property?** Check all that apply.

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other \_\_\_\_\_

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property?

\$190,000.00

Current value of the portion you own?

\$190,000.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

**Fee Simple**

Check if this is community property (see instructions)

**Who has an interest in the property?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: \_\_\_\_\_

Source of Value: LUIS ABREU & ASSOCIATES

##### 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here →

\$190,000.00

#### Part 2: Describe Your Vehicles

**Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.**



Debtor REYES AYALA, JOSE LUIS; RIVAS TORRES, CHIARELIS

Case number (if known) 24-04556-11

3.5	Make: <u>PETERBILT</u> Model: <u>T337</u> Year: <u>2015</u> Approximate mileage: _____ Other information: <div style="border: 1px solid black; padding: 5px; display: inline-block;">PLATE: HP15637</div>	Who has an interest in the property? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another  <input checked="" type="checkbox"/> Check if this is community property (see instructions)	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.	
3.6	Make: <u>BMW</u> Model: <u>X3</u> Year: <u>2015</u> Approximate mileage: _____ Other information: <div style="border: 1px solid black; padding: 5px; display: inline-block;">DRIVEN BY MRS VIN: 5UXWZ7C57F0M82876</div>	Who has an interest in the property? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another  <input checked="" type="checkbox"/> Check if this is community property (see instructions)	Current value of the entire property?	Current value of the portion you own?
3.7	Make: <u>TOYOTA</u> Model: <u>SCION</u> Year: <u>2016</u> Approximate mileage: _____ Other information: <div style="border: 1px solid black; padding: 5px; display: inline-block;">DRIVEN BY SON VIN: JTKJF5C78GJ020924</div>	Who has an interest in the property? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another  <input checked="" type="checkbox"/> Check if this is community property (see instructions)	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.	
3.8	Make: <u>LEXUS</u> Model: _____ Year: <u>2020</u> Approximate mileage: _____ Other information: <div style="border: 1px solid black; padding: 5px; display: inline-block;">BARE TITLE. DEBOT SOLD VEHICLE IN MARCH 2024, HOWEVER TITLE HAS NOT BEEN TRANSFERRED.</div>	Who has an interest in the property? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another  <input checked="" type="checkbox"/> Check if this is community property (see instructions)	Current value of the entire property?	Current value of the portion you own?
3.9	Make: <u>KENWORTH</u> Model: <u>T370</u> Year: <u>2013</u> Approximate mileage: _____ Other information: <div style="border: 1px solid black; padding: 5px; display: inline-block;">VIN: 2NKHHM7XXDM369106</div>	Who has an interest in the property? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another  <input checked="" type="checkbox"/> Check if this is community property (see instructions)	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.	

3.10	Make: <u>FORD</u>	<b>Who has an interest in the property? Check one.</b>		
	Model: <u>RAPTOR</u>	<input checked="" type="checkbox"/> Debtor 1 only	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.	
	Year: <u>2017</u>	<input type="checkbox"/> Debtor 2 only		
	Approximate mileage: _____	<input type="checkbox"/> Debtor 1 and Debtor 2 only		
		<input type="checkbox"/> At least one of the debtors and another		
	Other information:	<input type="checkbox"/> <b>Check if this is community property (see instructions)</b>	<b>Current value of the entire property?</b>	<b>Current value of the portion you own?</b>
	VIN: <b>1FTFW1RG8FC13771-LEASE</b>		<b>\$28,000.00</b>	<b>\$1.12</b>

3.11	Make: _____	<b>Who has an interest in the property? Check one.</b>		
	Model: _____	<input type="checkbox"/> Debtor 1 only	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.	
	Year: _____	<input type="checkbox"/> Debtor 2 only		
	Approximate mileage: _____	<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only		
		<input type="checkbox"/> At least one of the debtors and another		
	Other information:	<input checked="" type="checkbox"/> <b>Check if this is community property (see instructions)</b>	<b>Current value of the entire property?</b>	<b>Current value of the portion you own?</b>
			<b>\$97,000.00</b>	<b>\$97,000.00</b>

4. **Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- No  
 Yes

4.1	Make: _____	<b>Who has an interest in the property? Check one.</b>		
	Model: _____	<input type="checkbox"/> Debtor 1 only	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.	
	Year: _____	<input type="checkbox"/> Debtor 2 only		
	Other information:	<input type="checkbox"/> Debtor 1 and Debtor 2 only		
		<input type="checkbox"/> At least one of the debtors and another		
		<input type="checkbox"/> <b>Check if this is community property (see instructions)</b>	<b>Current value of the entire property?</b>	<b>Current value of the portion you own?</b>

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here ..... →

**\$224,002.12**

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

**Current value of the portion you own?**  
Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

- No  
 Yes. Describe. ....

**BEDROOM SET, DINING ROOM SET, LIVING ROOM SET, TABLES & CHAIRS, LAMPS, KITCHEN UTENSILS, MICROWAVE OVEN, STOVE, FRIDGE, WASHER, DRYER.**

**\$3,500.00**

**7. Electronics**

*Examples:* Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

 No Yes. Describe. ....**TV, RADIO, COMPUTER, CELL PHONES****\$2,000.00****8. Collectibles of value**

*Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

 No Yes. Describe. ....**9. Equipment for sports and hobbies**

*Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

 No Yes. Describe. ....**10. Firearms**

*Examples:* Pistols, rifles, shotguns, ammunition, and related equipment

 No Yes. Describe. ....**SPRINGFIELD XD .40****\$600.00****11. Clothes**

*Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories

 No Yes. Describe. ....**CLOTHING****\$700.00****12. Jewelry**

*Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

 No Yes. Describe. ....**WEDDING BANDS, RINGS, WATCHES, NECKLACES, BRACELETS.****\$500.00****13. Non-farm animals**

*Examples:* Dogs, cats, birds, horses

 No Yes. Describe. ....**14. Any other personal and household items you did not already list, including any health aids you did not list** No Yes. Give specific information. ....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here .....



\$7,300.00

#### Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?  
Do not deduct secured claims or exemptions.

##### 16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

No

Yes ..... Cash: ..... \$100.00

##### 17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

No

Yes ..... Institution name:

BANCO POPULAR

17.1. Checking account: Account Number: 0375 \$6,125.00

##### 18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

No

Yes ..... Institution or issuer name:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

##### 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

No

Yes. Give specific information about them.....

Name of entity:

% of ownership:

\_\_\_\_\_ \_\_\_\_\_  
 \_\_\_\_\_ \_\_\_\_\_  
 \_\_\_\_\_ \_\_\_\_\_  
 \_\_\_\_\_ \_\_\_\_\_

**20. Government and corporate bonds and other negotiable and non-negotiable instruments**

*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.  
*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.

No

Yes. Give specific information about them.....

Issuer name:

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**21. Retirement or pension accounts**

*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

No

Yes. List each account separately. Type of account: Institution name:

401(k) or similar plan:	<hr/>	<hr/>
Pension plan:	<hr/>	<hr/>
IRA:	<hr/>	<hr/>
Retirement account:	<hr/>	<hr/>
Keogh:	<hr/>	<hr/>
Additional account:	<hr/>	<hr/>
Additional account:	<hr/>	<hr/>

**22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company

*Examples:* Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

No

Yes .....

Institution name or individual:

Electric:	<u>LUMA</u>	<u>\$125.00</u>
Water:	<u>AAA</u>	<u>\$75.00</u>

**23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)**

No

Yes ..... Issuer name and description:

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## 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

 No Yes ..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

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## 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

 No Yes. Give specific information about them. ....

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## 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

 No Yes. Give specific information about them. ....

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## 27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

 No Yes. Give specific information about them. ....

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## Money or property owed to you?

**Current value of the portion you own?**  
Do not deduct secured claims or exemptions.

## 28. Tax refunds owed to you

 No Yes. Give specific information about them, including whether you already filed the returns and the tax years. ....

Federal:

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State:

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Local:

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## 29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

No Yes. Give specific information. .......


Alimony:

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Maintenance:

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Support:

--

Divorce settlement:

--

Property settlement:

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## 30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

 No Yes. Give specific information. .......


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## 31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

 No

Yes. Name the insurance company  
of each policy and list its value. ....

Company name:  
  
**TRIPLE S**

Beneficiary:

**CHIARELIS RIVAS,  
CHIANELIS REYES AND  
JEAN REYES**

Surrender or refund value:

**\$10,000.00**

## 32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

 No Yes. Give specific information. .......


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## 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

 No Yes. Describe each claim. .......


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## 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

 No Yes. Describe each claim. .......


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## 35. Any financial assets you did not already list

 No Yes. Give specific information. .......


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36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here ..... → \$16,425.00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

- No. Go to Part 6.  
 Yes. Go to line 38.

Current value of the portion you own?  
Do not deduct secured claims or exemptions.

38. Accounts receivable or commissions you already earned

- No  
 Yes. Describe. ....

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39. Office equipment, furnishings, and supplies

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

- No  
 Yes. Describe. ....

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40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade

- No  
 Yes. Describe. ....

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41. Inventory

- No  
 Yes. Describe. ....

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42. Interests in partnerships or joint ventures

- No  
 Yes. Describe .....

Name of entity:

% of ownership:


43. Customer lists, mailing lists, or other compilations

No

Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?

No

Yes. Describe. ....

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44. Any business-related property you did not already list

No

Yes. Give specific information .....


45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here .....



\$0.00

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.  
If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

No. Go to Part 7.

Yes. Go to line 47.

Current value of the portion you own?  
Do not deduct secured claims or exemptions.

47. Farm animals

Examples: Livestock, poultry, farm-raised fish

No

Yes .....

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48. Crops—either growing or harvested

No

Yes. Give specific information. ....

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## 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade

 No Yes .....

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## 50. Farm and fishing supplies, chemicals, and feed

 No Yes .....

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## 51. Any farm- and commercial fishing-related property you did not already list

 No Yes. Give specific information. .....

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## 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here .....



\$0.00

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## Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

## 53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

 No Yes. Give specific information. .....


## 54. Add the dollar value of all of your entries from Part 7. Write that number here .....



\$0.00

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## Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2 .....	→	\$190,000.00
56. Part 2: Total vehicles, line 5		<u>\$224,002.12</u>
57. Part 3: Total personal and household items, line 15		<u>\$7,300.00</u>
58. Part 4: Total financial assets, line 36		<u>\$16,425.00</u>
59. Part 5: Total business-related property, line 45		<u>\$0.00</u>
60. Part 6: Total farm- and fishing-related property, line 52		<u>\$0.00</u>
61. Part 7: Total other property not listed, line 54	+	<u>\$0.00</u>
62. Total personal property. Add lines 56 through 61. ....		<u>\$247,727.12</u>
		Copy personal property total → + <u>\$247,727.12</u>

63. Total of all property on Schedule A/B. Add line 55 + line 62. ....

**\$437,727.12**

Fill in this information to identify your case:

Debtor 1	<b>JOSE</b>	<b>LUIS</b>	<b>REYES AYALA</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<b>CHIARELIS</b>	<b>RIVAS TORRES</b>	
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: District of <b>Puerto Rico</b>			
Case number <b>24-04556-11</b> (if known)			

 Check if this is an amended filingOfficial Form 106CSchedule C: The Property You Claim as Exempt

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

**For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.**

## Part 1: Identify the Property You Claim as Exempt

## 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim <i>Check only one box for each exemption.</i>	Specific laws that allow exemption
Brief description:  2 STORY CONCRETE PROPERTY WITH 2 BEDROOMS AND 2 BATHROOMS BO CAGUITAS LKM 2 SR 777 INT Aguas Buenas, PR 00703	<u>\$190,000.00</u>	<input checked="" type="checkbox"/> <u>\$40,000.00</u>	<u>11 U.S.C. § 522(d)(1)</u>

Line from *Schedule A/B*: 1.1

100% of fair market value, up to any applicable statutory limit

## 3. Are you claiming a homestead exemption of more than \$189,050?

(Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.)

- No  
 Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?  
 No  
 Yes

Debtor 1	<u>JOSE</u>	<u>LUIS</u>	<u>REYES AYALA</u>	Case number (if known) <u>24-04556-11</u>
Debtor 2	<u>CHIARELIS</u>		<u>RIVAS TORRES</u>	
	First Name	Middle Name	Last Name	

## Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim <i>Check only one box for each exemption.</i>	Specific laws that allow exemption
Brief description:	<b>2015 BMW X3</b> VIN: <b>5UXWZ7C57F0M82876</b> <b>DRIVEN BY MRS</b>	<u>\$13,000.00</u>	<input checked="" type="checkbox"/> <u>\$4,450.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit <input checked="" type="checkbox"/> <u>\$6,550.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(2)</u> <u>11 U.S.C. § 522(d)(5)</u>
Line from Schedule A/B:	<u>3.6</u>			
Brief description:	<b>2016 TOYOTA SCION</b> VIN: <b>JTKJF5C78GJ020924</b> <b>DRIVEN BY SON</b>	<u>\$7,000.00</u>	<input checked="" type="checkbox"/> <u>\$7,000.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(5)</u>
Line from Schedule A/B:	<u>3.7</u>			
Brief description:	<b>BEDROOM SET, DINING ROOM SET, LIVING ROOM SET, TABLES &amp; CHAIRS, LAMPS, KITCHEN UTENSILS, MICROWAVE OVEN, STOVE, FRIDGE, WASHER, DRYER.</b>	<u>\$3,500.00</u>	<input checked="" type="checkbox"/> <u>\$3,500.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(3)</u>
Line from Schedule A/B:	<u>6</u>			
Brief description:	<b>TV, RADIO, COMPUTER, CELL PHONES</b>	<u>\$2,000.00</u>	<input checked="" type="checkbox"/> <u>\$2,000.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(3)</u>
Line from Schedule A/B:	<u>7</u>			

Debtor 1	<u>JOSE</u>	<u>LUIS</u>	<u>REYES AYALA</u>	Case number (if known) <u>24-04556-11</u>
Debtor 2	<u>CHIARELIS</u>		<u>RIVAS TORRES</u>	
	First Name	Middle Name	Last Name	

## Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
Brief description: <u>SPRINGFIELD XD .40</u>	<u>\$600.00</u>	<input checked="" type="checkbox"/> <u>\$600.00</u>	<u>11 U.S.C. § 522(d)(5)</u>
Line from Schedule A/B: <u>10</u>		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: <u>CLOTHING</u>	<u>\$700.00</u>	<input checked="" type="checkbox"/> <u>\$700.00</u>	<u>11 U.S.C. § 522(d)(3)</u>
Line from Schedule A/B: <u>11</u>		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: <u>WEDDING BANDS, RINGS, WATCHES, NECKLACES, BRACELETS.</u>	<u>\$500.00</u>	<input checked="" type="checkbox"/> <u>\$500.00</u>	<u>11 U.S.C. § 522(d)(4)</u>
Line from Schedule A/B: <u>12</u>		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: <u>CASH ON HAND</u>	<u>\$100.00</u>	<input checked="" type="checkbox"/> <u>\$100.00</u>	<u>11 U.S.C. § 522(d)(5)</u>
Line from Schedule A/B: <u>16</u>		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: <u>BANCO POPULAR Checking account Acct. No.: 0375</u>	<u>\$6,125.00</u>	<input checked="" type="checkbox"/> <u>\$4,500.00</u>	<u>11 U.S.C. § 522(d)(5)</u>
Line from Schedule A/B: <u>17</u>		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: <u>TRIPLE S</u>	<u>\$10,000.00</u>	<input checked="" type="checkbox"/> <u>\$10,000.00</u>	<u>11 U.S.C. § 522(d)(11)(C)</u>
Line from Schedule A/B: <u>31</u>		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	

Fill in this information to identify your case:

Debtor 1	<b>JOSE</b>	<b>LUIS</b>	<b>REYES AYALA</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<b>CHIARELIS</b>		<b>RIVAS TORRES</b>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: District of <b>Puerto Rico</b>			
Case number (if known) <b>24-04556-11</b>			

 Check if this is an amended filingOfficial Form 106DSchedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

## 1. Do any creditors have claims secured by your property?

- No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- Yes. Fill in all of the information below.

## Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 <b>CRIM</b>  Creditor's Name <b>PO Box 195387</b> Number Street  <b>San Juan, PR 00919-5387</b> City State ZIP Code	Describe the property that secures the claim:  <b>2 STORY CONCRETE PROPERTY WITH 2 BEDROOMS AND 2 BATHROOMS</b> BO CAGUITAS LKM 2 SR 777 INT Aguas Buenas, PR 00703	<b>\$1,000.00</b>	<b>\$190,000.00</b>
	As of the date you file, the claim is: Check all that apply.  <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$0.00</b>	
	Nature of lien. Check all that apply.  <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another  <input checked="" type="checkbox"/> Check if this claim relates to a community debt	<b>PROPERTY TAXES</b>	
Date debt was incurred _____	Last 4 digits of account number _____		
Add the dollar value of your entries in Column A on this page. Write that number here: <b>\$1,000.00</b>			

Debtor 1	<u>JOSE</u>	<u>LUIS</u>	<u>REYES AYALA</u>	Case number (if known) <u>24-04556-11</u>
Debtor 2	<u>CHIARELIS</u>		<u>RIVAS TORRES</u>	
	First Name	Middle Name	Last Name	

Part 1:  Additional Page  After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.	Column A  Amount of claim  Do not deduct the value of collateral.	Column B  Value of collateral that supports this claim	Column C  Unsecured portion  If any		
2.2 <u>FIRSTBANK</u>  Creditor's Name <u>Po Box 9146</u>  Number Street <u>San Juan, PR 00908-0146</u>  City State ZIP Code	Describe the property that secures the claim:  <u>2017 FORD RAPTOR</u>	<u>\$40,101.28</u>	<u>\$1.12</u>	<u>\$40,100.16</u>	
<b>As of the date you file, the claim is:</b> Check all that apply.					
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed					
<b>Nature of lien.</b> Check all that apply.					
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim relates to a community debt					
Date debt was incurred _____ Last 4 digits of account number _____					
Add the dollar value of your entries in Column A on this page. Write that number here: <u>\$40,101.28</u>					
If this is the last page of your form, add the dollar value totals from all pages. Write that number here: _____					

Debtor 1	<b>JOSE</b>	<b>LUIS</b>	<b>REYES AYALA</b>	Case number (if known) <u>24-04556-11</u>
Debtor 2	<b>CHIARELIS</b>		<b>RIVAS TORRES</b>	
	First Name	Middle Name	Last Name	

Part 1:	Additional Page After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.		Column A	Column B	Column C
			<b>Amount of claim</b> Do not deduct the value of collateral.	<b>Value of collateral that supports this claim</b>	<b>Unsecured portion</b> If any
<b>2.3</b> <b>GENERAL EQUIPMENT FINANCIAL</b>	Describe the property that secures the claim:		<u>\$67,000.00</u>	<u>\$97,000.00</u>	<u>\$0.00</u>
Creditor's Name <b>602 Ave Fernandez Juncos Apt 2203</b>	Motor vehicle				
Number Street <b>San Juan, PR 00907-3174</b>	As of the date you file, the claim is: Check all that apply.				
	<input type="checkbox"/> Contingent				
	<input type="checkbox"/> Unliquidated				
	<input checked="" type="checkbox"/> Disputed				
City State ZIP Code <b>Who owes the debt?</b> Check one.	Nature of lien. Check all that apply.				
<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)				
<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)				
<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Judgment lien from a lawsuit				
<input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Other (including a right to offset) _____				
<input checked="" type="checkbox"/> Check if this claim relates to a community debt					
Date debt was incurred _____	Last 4 digits of account number _____				
Remarks: SEE, 3.1, 3.2, 3.3, 3.4, 3.5, 3.9 AND 3.10					
<b>2.4</b> <b>POPULAR MORTGAGE</b>	Describe the property that secures the claim:		<u>\$137,264.00</u>	<u>\$190,000.00</u>	<u>\$0.00</u>
Creditor's Name <b>Po Box 362708</b>	2 STORY CONCRETE PROPERTY WITH2 BEDROOMS AND 2 BATHROOMS BO CAGUITAS LKM 2 SR 777 INT Aguas Buenas, PR 00703				
Number Street <b>San Juan, PR 00936-2708</b>	As of the date you file, the claim is: Check all that apply.				
	<input type="checkbox"/> Contingent				
	<input type="checkbox"/> Unliquidated				
	<input checked="" type="checkbox"/> Disputed				
City State ZIP Code <b>Who owes the debt?</b> Check one.	Nature of lien. Check all that apply.				
<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)				
<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)				
<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Judgment lien from a lawsuit				
<input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Other (including a right to offset) _____				
<input checked="" type="checkbox"/> Check if this claim relates to a community debt					
Date debt was incurred <u>01/2017</u>	Last 4 digits of account number <u>0 2 9 0</u>				
Add the dollar value of your entries in Column A on this page. Write that number here: <u>\$204,264.00</u>					
If this is the last page of your form, add the dollar value totals from all pages. Write that number here: <u>\$245,365.28</u>					

Fill in this information to identify your case:

Debtor 1	<b>JOSE</b>	<b>LUIS</b>	<b>REYES AYALA</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<b>CHIARELIS</b>	<b>RIVAS TORRES</b>	
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: District of <b>Puerto Rico</b>			
Case number <b>24-04556-11</b> (if known)			

 Check if this is an amended filingOfficial Form 106E/FSchedule E/F: Creditors Who Have Unsecured Claims

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Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

## Part 1: List All of Your PRIORITY Unsecured Claims

## 1. Do any creditors have priority unsecured claims against you?

- No. Go to Part 2.  
 Yes.

## 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

	Total claim	Priority amount	Nonpriority amount
	<b>\$45,000.00</b>	<b>\$40,000.00</b>	<b>\$5,000.00</b>

2.1	<b>INTERNAL REVENUE SERVICE</b>	Last 4 digits of account number	<b>_____</b>	<b>\$45,000.00</b>	<b>\$40,000.00</b>	<b>\$5,000.00</b>
	Priority Creditor's Name					
	<b>PO Box 7346</b>	When was the debt incurred?	<b>2020-2023</b>			
	Number Street					
	<b>Philadelphia, PA 19101</b>	As of the date you file, the claim is: Check all that apply.				
	City State ZIP Code	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed				
	Who incurred the debt? Check one.	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt				
	Type of PRIORITY unsecured claim:	<input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____				
	Is the claim subject to offset?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Debtor 1	<u>JOSE</u>	<u>LUIS</u>	<u>REYES AYALA</u>	Case number (if known) <u>24-04556-11</u>
Debtor 2	<u>CHIARELIS</u>		<u>RIVAS TORRES</u>	
	First Name	Middle Name	Last Name	

## Part 2: List All of Your NONPRIORITY Unsecured Claims

## 3. Do any creditors have nonpriority unsecured claims against you?

- No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
 Yes

## 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

			Total claim
4.1	<b>AMAZON</b>	Last 4 digits of account number	<u>2 0 0 2</u>
	Nonpriority Creditor's Name	When was the debt incurred?	<u>2020</u>
	Po Box 1270		
	Number Street		
	<b>Newark, NJ 07101-1270</b>	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Student loans	
	<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
	<input type="checkbox"/> At least one of the debtors and another	<input checked="" type="checkbox"/> Other. Specify <u>Credit Card BUSINESS</u>	
	<input checked="" type="checkbox"/> Check if this claim is for a community debt		
	Is the claim subject to offset?		
	<input checked="" type="checkbox"/> No		
	<input type="checkbox"/> Yes		
4.2	<b>AMERICAN EXPRESS</b>	Last 4 digits of account number	<u>6 7 0 3</u>
	Nonpriority Creditor's Name	When was the debt incurred?	<u>12/2018</u>
	PO Box 6031		
	Number Street		
	<b>Carol Stream, IL 60197-6031</b>	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Student loans	
	<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
	<input type="checkbox"/> At least one of the debtors and another	<input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>	
	<input checked="" type="checkbox"/> Check if this claim is for a community debt		
	Is the claim subject to offset?		
	<input checked="" type="checkbox"/> No		
	<input type="checkbox"/> Yes		

Debtor 1	<u>JOSE</u>	<u>LUIS</u>	<u>REYES AYALA</u>	Case number (if known) <u>24-04556-11</u>
Debtor 2	<u>CHIARELIS</u>		<u>RIVAS TORRES</u>	
	First Name	Middle Name	Last Name	

## Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.					Total claim
4.3	<u>AMERICAN EXPRESS</u>		Last 4 digits of account number	<u>3 3 1 3</u>	\$3,461.00
Nonpriority Creditor's Name		When was the debt incurred?			<u>09/2021</u>
<u>PO Box 6031</u>					
Number	Street	As of the date you file, the claim is: Check all that apply.			
<u>Carol Stream, IL 60197-6031</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
City	State	ZIP Code			
Who incurred the debt? Check one.					
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt					
Type of NONPRIORITY unsecured claim:					
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card -BUSINESS DEBT</u>					
Is the claim subject to offset?					
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes					
4.4	<u>AMERICAN EXPRESS</u>		Last 4 digits of account number	<u>0 2 8 3</u>	\$6,085.00
Nonpriority Creditor's Name		When was the debt incurred?			<u>10/2017</u>
<u>PO Box 6031</u>					
Number	Street	As of the date you file, the claim is: Check all that apply.			
<u>Carol Stream, IL 60197-6031</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
City	State	ZIP Code			
Who incurred the debt? Check one.					
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt					
Type of NONPRIORITY unsecured claim:					
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>					
Is the claim subject to offset?					
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes					

Debtor 1	<u>JOSE</u>	<u>LUIS</u>	<u>REYES AYALA</u>	Case number (if known) <u>24-04556-11</u>
Debtor 2	<u>CHIARELIS</u>		<u>RIVAS TORRES</u>	
	First Name	Middle Name	Last Name	

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.					Total claim
4.5	<u>AMERICAN EXPRESS</u>		Last 4 digits of account number	<u>2 0 0 4</u>	\$5,180.00
	Nonpriority Creditor's Name		When was the debt incurred?	<u>2020</u>	
	<u>PO Box 1270</u>				
	Number	Street	As of the date you file, the claim is: Check all that apply.		
	<u>Newark, NJ 07101</u>		<input type="checkbox"/> Contingent		
	City	State	<input type="checkbox"/> Unliquidated		
			<input type="checkbox"/> Disputed		
	Who incurred the debt? Check one.			Type of NONPRIORITY unsecured claim:	
	<input type="checkbox"/> Debtor 1 only			<input type="checkbox"/> Student loans	
	<input type="checkbox"/> Debtor 2 only			<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only			<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
	<input type="checkbox"/> At least one of the debtors and another			<input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>	
	<input checked="" type="checkbox"/> Check if this claim is for a community debt				
	Is the claim subject to offset?				
	<input checked="" type="checkbox"/> No				
	<input type="checkbox"/> Yes				
4.6	<u>BANCO POPULAR DE PR</u>		Last 4 digits of account number	<u>6 2 7 6</u>	\$7,202.00
	Nonpriority Creditor's Name		When was the debt incurred?	<u>10/2021</u>	
	<u>Po Box 362708</u>				
	Number	Street	As of the date you file, the claim is: Check all that apply.		
	<u>San Juan, PR 00936-2708</u>		<input type="checkbox"/> Contingent		
	City	State	<input type="checkbox"/> Unliquidated		
			<input type="checkbox"/> Disputed		
	Who incurred the debt? Check one.			Type of NONPRIORITY unsecured claim:	
	<input type="checkbox"/> Debtor 1 only			<input type="checkbox"/> Student loans	
	<input type="checkbox"/> Debtor 2 only			<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only			<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
	<input type="checkbox"/> At least one of the debtors and another			<input checked="" type="checkbox"/> Other. Specify <u>Credit Card-BUSINESS</u>	
	<input checked="" type="checkbox"/> Check if this claim is for a community debt				
	Is the claim subject to offset?				
	<input checked="" type="checkbox"/> No				
	<input type="checkbox"/> Yes				

Debtor 1	<u>JOSE</u>	<u>LUIS</u>	<u>REYES AYALA</u>	Case number (if known) <u>24-04556-11</u>
Debtor 2	<u>CHIARELIS</u>		<u>RIVAS TORRES</u>	
	First Name	Middle Name	Last Name	

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.					Total claim
<u>4.7</u>	<b>BANK OF AMERICA</b>		Last 4 digits of account number	<u>0 5 5 2</u>	<u>\$3,950.00</u>
	Nonpriority Creditor's Name		When was the debt incurred?	<u>03/2022</u>	
	<u>PO Box 15284</u>				
	Number	Street	As of the date you file, the claim is: Check all that apply.		
	<u>Wilmington, DE 19850</u>		<input type="checkbox"/> Contingent		
	City	State	<input type="checkbox"/> Unliquidated		
			<input type="checkbox"/> Disputed		
	Who incurred the debt? Check one.			Type of NONPRIORITY unsecured claim:	
	<input type="checkbox"/> Debtor 1 only			<input type="checkbox"/> Student loans	
	<input type="checkbox"/> Debtor 2 only			<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only			<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
	<input type="checkbox"/> At least one of the debtors and another			<input checked="" type="checkbox"/> Other. Specify <u>Credit Card-BUSINESS</u>	
	<input checked="" type="checkbox"/> Check if this claim is for a community debt				
	Is the claim subject to offset?				
	<input checked="" type="checkbox"/> No				
	<input type="checkbox"/> Yes				
<u>4.8</u>	<b>BANK OF AMERICA</b>		Last 4 digits of account number	<u>7 4 5 0</u>	<u>\$5,082.00</u>
	Nonpriority Creditor's Name		When was the debt incurred?	<u>02/2017</u>	
	<u>PO Box 15284</u>				
	Number	Street	As of the date you file, the claim is: Check all that apply.		
	<u>Wilmington, DE 19850</u>		<input type="checkbox"/> Contingent		
	City	State	<input type="checkbox"/> Unliquidated		
			<input type="checkbox"/> Disputed		
	Who incurred the debt? Check one.			Type of NONPRIORITY unsecured claim:	
	<input type="checkbox"/> Debtor 1 only			<input type="checkbox"/> Student loans	
	<input type="checkbox"/> Debtor 2 only			<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only			<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
	<input type="checkbox"/> At least one of the debtors and another			<input checked="" type="checkbox"/> Other. Specify <u>Credit Card-BUSINESS</u>	
	<input checked="" type="checkbox"/> Check if this claim is for a community debt				
	Is the claim subject to offset?				
	<input checked="" type="checkbox"/> No				
	<input type="checkbox"/> Yes				

Debtor 1	<u>JOSE</u>	<u>LUIS</u>	<u>REYES AYALA</u>	Case number (if known) <u>24-04556-11</u>
Debtor 2	<u>CHIARELIS</u>		<u>RIVAS TORRES</u>	
	First Name	Middle Name	Last Name	

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.					Total claim
4.9	<u>BBY/CBNA</u>	Nonpriority Creditor's Name	Last 4 digits of account number	<u>0 2 8 0</u>	\$1,396.00
	<u>PO Box 790441</u>	Number Street	When was the debt incurred?	<u>05/2011</u>	
	<u>Saint Louis, MO 63179</u>	City State ZIP Code	As of the date you file, the claim is: Check all that apply.		
			<input type="checkbox"/> Contingent		
			<input type="checkbox"/> Unliquidated		
			<input type="checkbox"/> Disputed		
	Who incurred the debt? Check one.				
	<input type="checkbox"/> Debtor 1 only	Type of NONPRIORITY unsecured claim:			
	<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Student loans			
	<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	<input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts			
	<input checked="" type="checkbox"/> Check if this claim is for a community debt	<input checked="" type="checkbox"/> Other. Specify <u>Credit Card - BEST BUY</u>			
	Is the claim subject to offset?				
	<input checked="" type="checkbox"/> No				
	<input type="checkbox"/> Yes				
4.10	<u>CELTIC BANK</u>	Nonpriority Creditor's Name	Last 4 digits of account number	<u>3 0 Z L</u>	\$6,714.00
	<u>268 S State St Ste 300</u>	Number Street	When was the debt incurred?	<u>2020</u>	
	<u>Salt Lake City, UT 84111-5314</u>	City State ZIP Code	As of the date you file, the claim is: Check all that apply.		
			<input type="checkbox"/> Contingent		
			<input type="checkbox"/> Unliquidated		
			<input type="checkbox"/> Disputed		
	Who incurred the debt? Check one.				
	<input type="checkbox"/> Debtor 1 only	Type of NONPRIORITY unsecured claim:			
	<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Student loans			
	<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	<input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts			
	<input checked="" type="checkbox"/> Check if this claim is for a community debt	<input checked="" type="checkbox"/> Other. Specify <u>CREDIT CARD</u>			
	Is the claim subject to offset?				
	<input checked="" type="checkbox"/> No				
	<input type="checkbox"/> Yes				

Debtor 1	<u>JOSE</u>	<u>LUIS</u>	<u>REYES AYALA</u>	Case number (if known) <u>24-04556-11</u>
Debtor 2	<u>CHIARELIS</u>		<u>RIVAS TORRES</u>	
	First Name	Middle Name	Last Name	

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.					Total claim
<b>4.11</b>	<u>CELTIC BANK</u>		Last 4 digits of account number	<u>      </u>	<u>\$4,558.00</u>
	Nonpriority Creditor's Name		When was the debt incurred?		
	<u>268 S State St Ste 300</u>				
	Number	Street	As of the date you file, the claim is: Check all that apply.		
	<u>Salt Lake Cty, UT 84111-5314</u>		<input type="checkbox"/> Contingent		
	City	State	<input type="checkbox"/> Unliquidated		
	ZIP Code		<input type="checkbox"/> Disputed		
	Who incurred the debt? Check one.				
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt				
	Type of NONPRIORITY unsecured claim:				
	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CREDIT CARD</u>				
	Is the claim subject to offset?				
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
<b>4.12</b>	<u>CITI</u>		Last 4 digits of account number	<u>B 0 0 2</u>	<u>\$4,098.00</u>
	Nonpriority Creditor's Name		When was the debt incurred?	<u>12/2021</u>	
	<u>Po Box 6286</u>		As of the date you file, the claim is: Check all that apply.		
	Number	Street	<input type="checkbox"/> Contingent		
	<u>Sioux Falls, SD 57117-6286</u>		<input type="checkbox"/> Unliquidated		
	City	State	<input type="checkbox"/> Disputed		
	Who incurred the debt? Check one.				
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt				
	Type of NONPRIORITY unsecured claim:				
	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>				
	Is the claim subject to offset?				
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Debtor 1	<u>JOSE</u>	<u>LUIS</u>	<u>REYES AYALA</u>	Case number (if known) <u>24-04556-11</u>
Debtor 2	<u>CHIARELIS</u>		<u>RIVAS TORRES</u>	
	First Name	Middle Name	Last Name	

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.				Total claim
<b>4.13</b>	<b>CORPORACION FONDO DEL SEGURO DEL ESTADO</b>		Last 4 digits of account number	<u>      </u> <b>\$500.00</b>
Nonpriority Creditor's Name		When was the debt incurred?		
<u>PO Box 248</u>				
Number	Street	As of the date you file, the claim is: Check all that apply.		
<u>Bayamon, PR 00960</u>		<input type="checkbox"/> Contingent		
City	State	<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
Who incurred the debt? Check one.				
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt				
Type of NONPRIORITY unsecured claim:				
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>                        </u>				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
<b>4.14</b>	<b>DISCOVER BANK</b>		Last 4 digits of account number	<u>6 0 0 3</u> <b>\$8,391.00</b>
Nonpriority Creditor's Name		When was the debt incurred?		
<u>PO Box 30939</u>		<u>11/2021</u>		
Number	Street	As of the date you file, the claim is: Check all that apply.		
<u>Salt Lake City, UT 84130</u>		<input type="checkbox"/> Contingent		
City	State	<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
Who incurred the debt? Check one.				
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt				
Type of NONPRIORITY unsecured claim:				
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card-BUSINESS</u>				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Debtor 1 JOSE LUIS REYES AYALA Case number (if known) 24-04556-11

Debtor 2 CHIARELIS RIVAS TORRES

First Name Middle Name Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.15	<b>DTOP</b> Nonpriority Creditor's Name <b>BOX 41269 MINILLAS STATION</b>	Last 4 digits of account number	<u>                </u> <u>                </u> <u>                </u> <u>                </u>	\$250.00
	Number Street	When was the debt incurred?	<u>                </u>	
	<b>San Juan, PR 00940</b>	As of the date you file, the claim is: Check all that apply.		
	City State ZIP Code	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed		
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:		
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>TRAFIC TICKETS</u>		
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
	Remarks: LICENCIA 4749498 NUMERO DE BOLETO 90208002365, 90416001770			
4.16	<b>LUMA ENERGY</b> Nonpriority Creditor's Name <b>PO Box 363508</b>	Last 4 digits of account number	<u>1</u> <u>9</u> <u>2</u> <u>0</u>	\$1,144.00
	Number Street	When was the debt incurred?	<u>2023</u>	
	<b>San Juan, PR 00936</b>	As of the date you file, the claim is: Check all that apply.		
	City State ZIP Code	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:		
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>UTILITIES</u>		
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1	<u>JOSE</u>	<u>LUIS</u>	<u>REYES AYALA</u>	Case number (if known) <u>24-04556-11</u>
Debtor 2	<u>CHIARELIS</u>		<u>RIVAS TORRES</u>	
	First Name	Middle Name	Last Name	

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.					Total claim
<b>4.17</b>	<u>ORIENTAL BANK</u>		Last 4 digits of account number	<u>6 5 4 3</u>	<u>\$1,273.00</u>
	Nonpriority Creditor's Name		When was the debt incurred?	<u>02/2017</u>	
	<u>Po Box 364745</u>				
	Number	Street	As of the date you file, the claim is: Check all that apply.		
	<u>San Juan, PR 00936-4745</u>		<input type="checkbox"/> Contingent		
	City	State	<input type="checkbox"/> Unliquidated		
			<input type="checkbox"/> Disputed		
	Who incurred the debt? Check one.			Type of NONPRIORITY unsecured claim:	
	<input type="checkbox"/> Debtor 1 only			<input type="checkbox"/> Student loans	
	<input type="checkbox"/> Debtor 2 only			<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only			<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
	<input type="checkbox"/> At least one of the debtors and another			<input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>	
	<input checked="" type="checkbox"/> Check if this claim is for a community debt				
	Is the claim subject to offset?				
	<input checked="" type="checkbox"/> No				
	<input type="checkbox"/> Yes				
<b>4.18</b>	<u>PAYPAL</u>		Last 4 digits of account number	<u>1 3 5 9</u>	<u>\$2,350.00</u>
	Nonpriority Creditor's Name		When was the debt incurred?	<u>2017</u>	
	<u>PO Box 71718</u>				
	Number	Street	As of the date you file, the claim is: Check all that apply.		
	<u>Philadelphia, PA 19176-1718</u>		<input type="checkbox"/> Contingent		
	City	State	<input type="checkbox"/> Unliquidated		
			<input type="checkbox"/> Disputed		
	Who incurred the debt? Check one.			Type of NONPRIORITY unsecured claim:	
	<input type="checkbox"/> Debtor 1 only			<input type="checkbox"/> Student loans	
	<input type="checkbox"/> Debtor 2 only			<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only			<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
	<input type="checkbox"/> At least one of the debtors and another			<input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>	
	<input checked="" type="checkbox"/> Check if this claim is for a community debt				
	Is the claim subject to offset?				
	<input checked="" type="checkbox"/> No				
	<input type="checkbox"/> Yes				

Debtor 1 JOSE LUIS REYES AYALA Case number (if known) 24-04556-11

Debtor 2 CHIARELIS RIVAS TORRES

First Name Middle Name Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.19	<b>PENTAGON FEDERAL CREDIT UNION</b>	Last 4 digits of account number	<u>Y</u> <u>0</u> <u>0</u> <u>9</u>	\$2,902.00
Nonpriority Creditor's Name		When was the debt incurred?		
<b>PO Box456</b>		<u>11/2021</u>		
Number	Street	As of the date you file, the claim is: Check all that apply.		
<b>Alexandria, VA 22313</b>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
City	State	ZIP Code		
Who incurred the debt? Check one.				
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt				
Type of NONPRIORITY unsecured claim:				
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
4.20	<b>POPULAR AUTO</b>	Last 4 digits of account number	_____	\$19,015.08
Nonpriority Creditor's Name		When was the debt incurred?		
<b>PO Box 50045</b>		<u>                        </u>		
Number	Street	As of the date you file, the claim is: Check all that apply.		
<b>00902</b>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed		
City	State	ZIP Code		
Who incurred the debt? Check one.				
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt				
Type of NONPRIORITY unsecured claim:				
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>DEFICIENCY VEHICLE-FORD 2016 T 250 VAN-SURRENDERED SEPTEMBER 2024- BUSINESS VEHICLE</u>				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Debtor 1	<u>JOSE</u>	<u>LUIS</u>	<u>REYES AYALA</u>	Case number (if known) <u>24-04556-11</u>
Debtor 2	<u>CHIARELIS</u>		<u>RIVAS TORRES</u>	
	First Name	Middle Name	Last Name	

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.					Total claim
<b>4.21</b>	<u>SMALL BUSINESS ADMINISTRATION</u>		Last 4 digits of account number	<u>8 0 0 2</u>	<u>\$79,200.00</u>
Nonpriority Creditor's Name		When was the debt incurred?			
<u>273 Ave Ponce De Leon Ste 510</u>					
Number	Street	As of the date you file, the claim is: Check all that apply.			
<u>San Juan, PR 00917-1937</u>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
City	State	ZIP Code			
Who incurred the debt? Check one.					
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt					
Type of NONPRIORITY unsecured claim:					
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>BUSINESS</u>					
Is the claim subject to offset?					
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes					
<b>4.22</b>	<u>SYNCHRONY BANK</u>		Last 4 digits of account number	<u>3 2 3 3</u>	<u>\$764.00</u>
Nonpriority Creditor's Name		When was the debt incurred?			
<u>ATTN: BANKRUPTCY DEPT.</u>					<u>03/2012</u>
<u>PO Box 965064</u>		As of the date you file, the claim is: Check all that apply.			
Number	Street	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
<u>Orlando, FL 32896-5064</u>					
City	State	ZIP Code			
Who incurred the debt? Check one.					
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt					
Type of NONPRIORITY unsecured claim:					
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card - SAM'S</u>					
Is the claim subject to offset?					
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes					

Debtor 1	<u>JOSE</u>	<u>LUIS</u>	<u>REYES AYALA</u>	Case number (if known) <u>24-04556-11</u>
Debtor 2	<u>CHIARELIS</u>		<u>RIVAS TORRES</u>	
	First Name	Middle Name	Last Name	

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.				Total claim
<u>4.23</u>	<u>SYNCHRONY BANK</u>	Last 4 digits of account number	<u>0 2 2 2</u>	<u>\$941.00</u>
Nonpriority Creditor's Name		When was the debt incurred?	<u>06/2012</u>	
<u>ATTN: BANKRUPTCY DEPT.</u>				
<u>PO Box 965064</u>		As of the date you file, the claim is: Check all that apply.		
Number	Street	<input type="checkbox"/> Contingent		
<u>Orlando, FL 32896-5064</u>		<input type="checkbox"/> Unliquidated		
City	State	<input type="checkbox"/> Disputed		
Who incurred the debt? Check one.				
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt				
Type of NONPRIORITY unsecured claim:				
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card - JCP</u>				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
<u>4.24</u>	<u>SYNCHRONY BANK</u>	Last 4 digits of account number	<u>5 4 6 0</u>	<u>\$6,448.00</u>
Nonpriority Creditor's Name		When was the debt incurred?	<u>08/2020</u>	
<u>ATTN: BANKRUPTCY DEPT.</u>				
<u>PO Box 965064</u>		As of the date you file, the claim is: Check all that apply.		
Number	Street	<input type="checkbox"/> Contingent		
<u>Orlando, FL 32896-5064</u>		<input type="checkbox"/> Unliquidated		
City	State	<input type="checkbox"/> Disputed		
Who incurred the debt? Check one.				
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt				
Type of NONPRIORITY unsecured claim:				
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card - NETWRK</u>				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Debtor 1	<u>JOSE</u>	<u>LUIS</u>	<u>REYES AYALA</u>	Case number (if known) <u>24-04556-11</u>
Debtor 2	<u>CHIARELIS</u>		<u>RIVAS TORRES</u>	
	First Name	Middle Name	Last Name	

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.				Total claim
<u>4.25</u>	<u>SYNCHRONY BANK</u>	Last 4 digits of account number	<u>4 3 9 7</u>	<u>\$5,952.00</u>
Nonpriority Creditor's Name		When was the debt incurred?	<u>04/2023</u>	
<u>ATTN: BANKRUPTCY DEPT.</u>				
<u>PO Box 965064</u>		As of the date you file, the claim is: Check all that apply.		
Number	Street	<input type="checkbox"/> Contingent		
<u>Orlando, FL 32896-5064</u>		<input type="checkbox"/> Unliquidated		
City	State	<input type="checkbox"/> Disputed		
Who incurred the debt? Check one.				
<input type="checkbox"/> Debtor 1 only	Type of NONPRIORITY unsecured claim:			
<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Student loans			
<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
<input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts			
<input checked="" type="checkbox"/> Check if this claim is for a community debt	<input checked="" type="checkbox"/> Other. Specify <u>Credit Card - CARE CREDIT</u>			
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				
<u>4.26</u>	<u>SYNCHRONY BANK</u>	Last 4 digits of account number	<u>1 3 5 9</u>	<u>\$2,853.00</u>
Nonpriority Creditor's Name		When was the debt incurred?	<u>12/2017</u>	
<u>ATTN: BANKRUPTCY DEPT.</u>				
<u>PO Box 965064</u>		As of the date you file, the claim is: Check all that apply.		
Number	Street	<input type="checkbox"/> Contingent		
<u>Orlando, FL 32896-5064</u>		<input type="checkbox"/> Unliquidated		
City	State	<input type="checkbox"/> Disputed		
Who incurred the debt? Check one.				
<input type="checkbox"/> Debtor 1 only	Type of NONPRIORITY unsecured claim:			
<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Student loans			
<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
<input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts			
<input checked="" type="checkbox"/> Check if this claim is for a community debt	<input checked="" type="checkbox"/> Other. Specify <u>Credit Card - PAYPAL</u>			
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				

Debtor 1	<u>JOSE</u>	<u>LUIS</u>	<u>REYES AYALA</u>	Case number (if known) <u>24-04556-11</u>
Debtor 2	<u>CHIARELIS</u>		<u>RIVAS TORRES</u>	
	First Name	Middle Name	Last Name	

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.				Total claim
4.27	<u>SYNCHRONY BANK</u>	Nonpriority Creditor's Name  <u>ATTN: BANKRUPTCY DEPT.</u>	Last 4 digits of account number  <u>1 5 9 8</u>	\$3,313.00
	<u>PO Box 965064</u>	Number Street  <u>Orlando, FL 32896-5064</u>	When was the debt incurred?  <u>11/2023</u>	
	<u>City State ZIP Code</u>		<b>As of the date you file, the claim is:</b> Check all that apply.	
			<input type="checkbox"/> Contingent	
			<input type="checkbox"/> Unliquidated	
			<input type="checkbox"/> Disputed	
	<b>Who incurred the debt?</b> Check one.		<b>Type of NONPRIORITY unsecured claim:</b>	
	<input type="checkbox"/> Debtor 1 only		<input type="checkbox"/> Student loans	
	<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
	<input type="checkbox"/> At least one of the debtors and another		<input checked="" type="checkbox"/> Other. Specify <u>Credit Card - NETWRK</u>	
	<input checked="" type="checkbox"/> Check if this claim is for a community debt			
	<b>Is the claim subject to offset?</b>			
	<input checked="" type="checkbox"/> No			
	<input type="checkbox"/> Yes			
4.28	<u>THD/CBNA</u>	Nonpriority Creditor's Name  <u>HOME DEPOT</u>	Last 4 digits of account number  <u>0 5 7 6</u>	\$412.00
	<u>P.O. Box 7032</u>	Number Street  <u>Sioux Falls, SD 57117-7032</u>	When was the debt incurred?  <u>12/2017</u>	
	<u>City State ZIP Code</u>		<b>As of the date you file, the claim is:</b> Check all that apply.	
			<input type="checkbox"/> Contingent	
			<input type="checkbox"/> Unliquidated	
			<input type="checkbox"/> Disputed	
	<b>Who incurred the debt?</b> Check one.		<b>Type of NONPRIORITY unsecured claim:</b>	
	<input type="checkbox"/> Debtor 1 only		<input type="checkbox"/> Student loans	
	<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
	<input type="checkbox"/> At least one of the debtors and another		<input checked="" type="checkbox"/> Other. Specify <u>Credit Card - HOME DEPOT</u>	
	<input checked="" type="checkbox"/> Check if this claim is for a community debt			
	<b>Is the claim subject to offset?</b>			
	<input checked="" type="checkbox"/> No			
	<input type="checkbox"/> Yes			

Debtor 1 **JOSE LUIS REYES AYALA** Case number (if known) **24-04556-11**  
Debtor 2 **CHIARELIS RIVAS TORRES**  
First Name Middle Name Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.					Total claim		
4.29	<b>THD/CBNA</b>	Last 4 digits of account number	<u>8</u>	<u>3</u>	<u>1</u>	<u>7</u>	\$2,158.00
Nonpriority Creditor's Name							
<b>HOME DEPOT</b>			When was the debt incurred? <u>02/2017</u>				
<b>P.O. Box 7032</b>			As of the date you file, the claim is: Check all that apply.				
Number	Street	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed					
<b>Sioux Falls, SD 57117-7032</b>			City	State	ZIP Code		
<b>Who incurred the debt?</b> Check one.							
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> <b>Check if this claim is for a community debt</b>							
<b>Type of NONPRIORITY unsecured claim:</b>							
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card - HOME DEPOT</u>							
<b>Is the claim subject to offset?</b>							
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes							

Debtor 1	<u>JOSE</u>	<u>LUIS</u>	<u>REYES AYALA</u>	Case number (if known) <u>24-04556-11</u>
Debtor 2	<u>CHIARELIS</u>		<u>RIVAS TORRES</u>	
	First Name	Middle Name	Last Name	

**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

**1. BANCO POPULAR**

Name  
PO Box 70100

Number Street  
\_\_\_\_\_

**San Juan, PR 00936**

City State ZIP Code  
\_\_\_\_\_

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.6 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 6 2 7 6

**2. CESC-COVID EIDL SERVICE CENTER**

Name  
14925 KINGSPORT RD

Number Street  
\_\_\_\_\_

**Fort Worth, TX 76155**

City State ZIP Code  
\_\_\_\_\_

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.21 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 8 0 0 2

Debtor 1	<b>JOSE</b>	<b>LUIS</b>	<b>REYES AYALA</b>	Case number (if known) <u>24-04556-11</u>
Debtor 2	<b>CHIARELIS</b>		<b>RIVAS TORRES</b>	
	First Name	Middle Name	Last Name	

**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159.  
Add the amounts for each type of unsecured claim.

		<b>Total claim</b>	
<b>Total claims from Part 1</b>	6a. Domestic support obligations	6a.	<u>\$0.00</u>
	6b. Taxes and certain other debts you owe the government	6b.	<u>\$45,000.00</u>
	6c. Claims for death or personal injury while you were intoxicated	6c.	<u>\$0.00</u>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	<u>+ \$0.00</u>
	6e. Total. Add lines 6a through 6d.	6e.	<u>\$45,000.00</u>

		<b>Total claim</b>	
<b>Total claims from Part 2</b>	6f. Student loans	6f.	<u>\$0.00</u>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	<u>\$0.00</u>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	<u>\$0.00</u>
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	<u>+ \$189,794.08</u>
	6j. Total. Add lines 6f through 6i.	6j.	<u>\$189,794.08</u>

Fill in this information to identify your case:

Debtor 1	<b>JOSE</b>	<b>LUIS</b>	<b>REYES AYALA</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<b>CHIARELIS</b>	<b>RIVAS TORRES</b>	
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<b>District of Puerto Rico</b>		
Case number (if known)	<b>24-04556-11</b>		

Check if this is an amended filing

## Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.  
 Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease	State what the contract or lease is for
2.1	<b>First Bank</b> Name <b>PO Box 9146</b> Number Street <b>San Juan, PR 00908-0146</b> City                  State                  ZIP Code	<b>AUTO LEASE- FORD F 150</b> <b>Contract to be ASSUMED</b>
2.2	<b>SUNNOVA ENERGY</b> Name <b>20 GREENWAY PLAZA SUITE 350</b> Number Street <b>Houston, TX 77046</b> City                  State                  ZIP Code	<b>SOLAR PANELS</b> <b>Contract to be REJECTED</b>
2.3	Name Number Street City                  State                  ZIP Code	
2.4	Name Number Street City                  State                  ZIP Code	

Fill in this information to identify your case:

Debtor 1	<b>JOSE</b>	<b>LUIS</b>	<b>REYES AYALA</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<b>CHIARELIS</b>	<b>RIVAS TORRES</b>	
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: District of <b>Puerto Rico</b>			
Case number <b>24-04556-11</b> (if known)			

 Check if this is an amended filingOfficial Form 106HSchedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. **Do you have any codebtors?** (If you are filing a joint case, do not list either spouse as a codebtor.)

No  
 Yes

2. **Within the last 8 years, have you lived in a community property state or territory?** (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No. Go to line 3.  
 Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

No  
 Yes. In which community state or territory did you live? \_\_\_\_\_ Fill in the name and current address of that person.

Name of your spouse, former spouse, or legal equivalent

Number Street

City State ZIP Code

3. **In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.**

<b>Column 1: Your codebtor</b>	<b>Column 2: The creditor to whom you owe the debt</b>
Check all schedules that apply:	
3.1	<input type="checkbox"/> Schedule D, line _____ <input type="checkbox"/> Schedule E/F, line _____ <input type="checkbox"/> Schedule G, line _____
Name	
Number Street	
City State ZIP Code	
3.2	<input type="checkbox"/> Schedule D, line _____ <input type="checkbox"/> Schedule E/F, line _____ <input type="checkbox"/> Schedule G, line _____
Name	
Number Street	
City State ZIP Code	

Fill in this information to identify your case:

Debtor 1	<b>JOSE</b>	<b>LUIS</b>	<b>REYES AYALA</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<b>CHIARELIS</b>		<b>RIVAS TORRES</b>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<b>District of Puerto Rico</b>		
Case number (if known)	<b>24-04556-11</b>		

Check if this is:

- An amended filing  
 A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

**Official Form 106I****Schedule I: Your Income**

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Employment****1. Fill in your employment information.**

If you have more than one job, attach a separate page with information about additional employers.

Include part time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

	<b>Debtor 1</b>	<b>Debtor 2 or non-filing spouse</b>
Employment status	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not Employed	<input type="checkbox"/> Employed <input checked="" type="checkbox"/> Not Employed
Occupation	<b>TRUCK DRIVER</b>	
Employer's name	<b>SELF EMPLOYED</b>	
Employer's address	Number Street	Number Street
	_____	_____
	_____	_____
	_____	_____
City	State	Zip Code
How long employed there? <b>14 years</b>		

**Part 2: Give Details About Monthly Income**

**Estimate monthly income as of the date you file this form.** If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	<b>For Debtor 1</b>	<b>For Debtor 2 or non-filing spouse</b>
2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be.	2. _____ <b>\$0.00</b>	_____ <b>\$0.00</b>
3. Estimate and list monthly overtime pay.	3. + _____ <b>\$0.00</b>	+ _____ <b>\$0.00</b>
4. Calculate gross income. Add line 2 + line 3.	4. _____ <b>\$0.00</b>	_____ <b>\$0.00</b>

Debtor 1  
Debtor 2

JOSE LUIS REYES AYALA  
CHIARELIS RIVAS TORRES

First Name Middle Name Last Name

Case number (if known) 24-04556-11

	For Debtor 1	For Debtor 2 or non-filing spouse
<b>Copy line 4 here..... →</b>	<b>4. \$0.00</b>	<b>\$0.00</b>
<b>5. List all payroll deductions:</b>		
5a. Tax, Medicare, and Social Security deductions	5a. \$0.00	\$0.00
5b. Mandatory contributions for retirement plans	5b. \$0.00	\$0.00
5c. Voluntary contributions for retirement plans	5c. \$0.00	\$0.00
5d. Required repayments of retirement fund loans	5d. \$0.00	\$0.00
5e. Insurance	5e. \$0.00	\$0.00
5f. Domestic support obligations	5f. \$0.00	\$0.00
5g. Union dues	5g. \$0.00	\$0.00
5h. Other deductions. Specify: _____	5h. + \$0.00	+ \$0.00
<b>6. Add the payroll deductions.</b> Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	<b>6. \$0.00</b>	<b>\$0.00</b>
<b>7. Calculate total monthly take-home pay.</b> Subtract line 6 from line 4.	<b>7. \$0.00</b>	<b>\$0.00</b>
<b>8. List all other income regularly received:</b>		
8a. Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$10,702.33	\$0.00
8b. Interest and dividends	8b. \$0.00	\$0.00
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive  Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$0.00	\$0.00
8d. Unemployment compensation	8d. \$0.00	\$0.00
8e. Social Security	8e. \$0.00	\$0.00
8f. Other government assistance that you regularly receive  Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: _____	8f. \$0.00	\$0.00
8g. Pension or retirement income	8g. \$0.00	\$0.00
8h. Other monthly income. Specify: _____	8h. + \$0.00	+ \$0.00
<b>9. Add all other income.</b> Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	<b>9. \$10,702.33</b>	<b>\$0.00</b>
<b>10. Calculate monthly income.</b> Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	<b>10. \$10,702.33</b>	<b>\$0.00</b>
	<b>10. \$10,702.33</b>	<b>= \$10,702.33</b>
<b>11. State all other regular contributions to the expenses that you list in Schedule J.</b>  Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify: _____	<b>11. + \$0.00</b>	
<b>12. Add the amount in the last column of line 10 to the amount in line 11.</b> The result is the combined monthly income. Write that amount on the <i>Summary of Your Assets and Liabilities and Certain Statistical Information</i> , if it applies	<b>12. \$10,702.33</b>	<b>Combined monthly income</b>
<b>13. Do you expect an increase or decrease within the year after you file this form?</b>	<input checked="" type="checkbox"/> No. _____	
	<input type="checkbox"/> Yes. Explain: _____	

Debtor 1  
Debtor 2JOSE CHIARELIS LUIS REYES AYALA  
RIVAS TORRES

First Name Middle Name Last Name

Case number (if known) 24-04556-11

## 8a. Attached Statement

**Business Income**

FINANCIAL REVIEW OF THE DEBTOR'S BUSINESS (NOTE: ONLY INCLUDE information directly related to the business operation.)

## PART A - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME:

1. Gross Monthly Income: **\$39,372.17**

## PART B - ESTIMATED AVERAGE FUTURE MONTHLY EXPENSES:

2. Ordinary and necessary expense **\$0.00**3. Net Employee Payroll (Other than debtor) **\$0.00**4. Payroll Taxes **\$0.00**5. Unemployment Taxes **\$0.00**6. Worker's Compensation **\$0.00**7. Other Taxes **\$0.00**8. Inventory Purchases (Including raw materials) **\$0.00**9. Purchase of Feed/Fertilizer/Seed/Spray **\$0.00**10. Rent (Other than debtor's principal residence) **\$0.00**11. Utilities **\$0.00**12. Office Expenses and Supplies **\$0.00**13. Repairs and Maintenance **\$0.00**14. Vehicle Expenses **\$0.00**15. Travel and Entertainment **\$0.00**16. Equipment Rental and Leases **\$0.00**17. Legal/Accounting/Other Professional Fees **\$0.00**18. Insurance **\$0.00**19. Employee Benefits (e.g., pension, medical, etc.) **\$0.00**

20. Payments to be Made Directly by Debtor to Secured Creditors for Pre-Petition Business Debts

TOTAL PAYMENTS TO SECURED CREDITORS **\$0.00**

21. Other Expenses

PAGO CAMIONES **\$3,097.00**SERVICIOS PROFESIONALES **\$12,196.67**GAS **\$6,429.33**REPARACIONES **\$2,972.67**SEGURO **\$1,551.00**COMIDA **\$688.33**PEAJE **\$1,366.67**REPARACIONES **\$368.17**TOTAL OTHER EXPENSES **\$28,669.83****\$28,669.83**

22. TOTAL MONTHLY EXPENSES(Add item 2 - 21)

## PART C - ESTIMATED AVERAGE NET MONTHLY INCOME:

23. AVERAGE NET MONTHLY INCOME(Subtract item 22 from item 1)

**\$10,702.33**

Fill in this information to identify your case:

Debtor 1	<b>JOSE</b>	<b>LUIS</b>	<b>REYES AYALA</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<b>CHIARELIS</b>		<b>RIVAS TORRES</b>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<b>District of Puerto Rico</b>		
Case number (if known)	<b>24-04556-11</b>		

Check if this is:

- An amended filing  
 A supplement showing postpetition chapter 13 expenses as of the following date:  
 \_\_\_\_\_  
 MM / DD / YYYY

**Official Form 106J****Schedule J: Your Expenses**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Your Household****1. Is this a joint case?**

- No. Go to line 2.  
 Yes. Does Debtor 2 live in a separate household?  
 No  
 Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

**2. Do you have dependents?**

	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes. Fill out this information for each dependent.....	<b>Dependent's relationship to Debtor 1 or Debtor 2</b>	<b>Dependent's age</b>	<b>Does dependent live with you?</b>
Do not list Debtor 1 and Debtor 2.			<b>Child</b>	<b>14</b>	<input type="checkbox"/> No. <input checked="" type="checkbox"/> Yes.
Do not state the dependents' names.			<b>Child</b>	<b>18</b>	<input type="checkbox"/> No. <input checked="" type="checkbox"/> Yes.
			_____	_____	<input type="checkbox"/> No. <input type="checkbox"/> Yes.
			_____	_____	<input type="checkbox"/> No. <input type="checkbox"/> Yes.
			_____	_____	<input type="checkbox"/> No. <input type="checkbox"/> Yes.

**3. Do your expenses include expenses of people other than yourself and your dependents?**

- No  
 Yes

**Part 2: Estimate Your Ongoing Monthly Expenses**

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I).

**4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.****Your expenses**

4.	<b>\$875.95</b>
4a.	<b>\$0.00</b>
4b.	<b>\$0.00</b>
4c.	<b>\$400.00</b>
4d.	<b>\$0.00</b>

**If not included in line 4:**

- 4a. Real estate taxes  
 4b. Property, homeowner's, or renter's insurance  
 4c. Home maintenance, repair, and upkeep expenses  
 4d. Homeowner's association or condominium dues

Debtor 1  
Debtor 2JOSE LUIS REYES AYALA  
CHIARELIS RIVAS TORRES

First Name Middle Name Last Name

Case number (if known) 24-04556-11

Your expenses		
5. Additional mortgage payments for your residence, such as home equity loans	5.	\$0.00
6. Utilities:		
6a. Electricity, heat, natural gas	6a.	\$340.00
6b. Water, sewer, garbage collection	6b.	\$70.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$400.00
6d. Other. Specify: _____	6d.	\$0.00
7. Food and housekeeping supplies	7.	\$750.00
8. Childcare and children's education costs	8.	\$300.00
9. Clothing, laundry, and dry cleaning	9.	\$300.00
10. Personal care products and services	10.	\$100.00
11. Medical and dental expenses	11.	\$100.00
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$400.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$300.00
14. Charitable contributions and religious donations	14.	\$0.00
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a.	\$0.00
15b. Health insurance	15b.	\$1,140.00
15c. Vehicle insurance	15c.	\$40.00
15d. Other insurance. Specify: _____	15d.	\$0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: <u>FEDERAL TAXES</u>	16.	\$1,250.00
17. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a.	\$0.00
17b. Car payments for Vehicle 2	17b.	\$0.00
17c. Other. Specify: _____	17c.	\$0.00
17d. Other. Specify: _____	17d.	\$0.00
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$0.00
19. Other payments you make to support others who do not live with you. Specify: _____	19.	\$0.00
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
20a. Mortgages on other property	20a.	\$0.00
20b. Real estate taxes	20b.	\$0.00
20c. Property, homeowner's, or renter's insurance	20c.	\$0.00
20d. Maintenance, repair, and upkeep expenses	20d.	\$0.00
20e. Homeowner's association or condominium dues	20e.	\$0.00

Debtor 1  
Debtor 2

JOSE LUIS REYES AYALA  
CHIARELIS RIVAS TORRES

First Name Middle Name Last Name

Case number (if known) 24-04556-11

21. Other. Specify: ASISTANCE TO PARENTS

21. + \$400.00

22. Calculate your monthly expenses.

22a. Add lines 4 through 21.

22a. \$7,165.95

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22b. \$0.00

22c. Add line 22a and 22b. The result is your monthly expenses.

22c. \$7,165.95

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I.

23a. \$10,702.33

23b. Copy your monthly expenses from line 22c above.

23b. - \$7,165.95

23c. Subtract your monthly expenses from your monthly income.

The result is your *monthly net income*.

23c. \$3,536.38

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

None

Yes.

Fill in this information to identify your case:

Debtor 1	<b>JOSE</b>	<b>LUIS</b>	<b>REYES AYALA</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<b>CHIARELIS</b>		<b>RIVAS TORRES</b>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<b>District of Puerto Rico</b>		
Case number (if known)	<b>24-04556-11</b>		

Check if this is an amended filing

## Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

#### Part 1: Summarize Your Assets

##### Your assets

Value of what you own

##### 1. Schedule A/B: Property (Official Form 106A/B)

1a. Copy line 55, Total real estate, from Schedule A/B.....	<b>\$190,000.00</b>
1b. Copy line 62, Total personal property, from Schedule A/B.....	<b>\$247,727.12</b>
1c. Copy line 63, Total of all property on Schedule A/B.....	<b>\$437,727.12</b>

#### Part 2: Summarize Your Liabilities

##### Your liabilities

Amount you owe

##### 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)

2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of Schedule D.....	<b>\$245,365.28</b>
---	---------------------

##### 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)

3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F.....	<b>\$45,000.00</b>
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F.....	<b>+ \$189,794.08</b>

##### Your total liabilities

**\$480,159.36**

#### Part 3: Summarize Your Income and Expenses

##### 4. Schedule I: Your Income (Official Form 106I)

Copy your combined monthly income from line 12 of Schedule I.....	<b>\$10,702.33</b>
---	--------------------

##### 5. Schedule J: Your Expenses (Official Form 106J)

Copy your monthly expenses from line 22c of Schedule J.....	<b>\$7,165.95</b>
---	-------------------

Debtor 1  
Debtor 2

JOSE LUIS REYES AYALA  
CHIARELIS RIVAS TORRES

First Name Middle Name Last Name

Case number (if known) 24-04556-11

Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

- No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.  
 Yes

7. What kind of debt do you have?

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.  
 Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the **Statement of Your Current Monthly Income**: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Total claim

From Part 4 on Schedule E/F, copy the following:

9a. Domestic support obligations (Copy line 6a.)

9b. Taxes and certain other debts you owe the government. (Copy line 6b.)

9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)

9d. Student loans. (Copy line 6f.)

9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

+

9g. **Total**. Add lines 9a through 9f.

Fill in this information to identify your case:

Debtor 1	<b>JOSE</b> First Name	<b>LUIS</b> Middle Name	<b>REYES AYALA</b> Last Name
Debtor 2 (Spouse, if filing)	<b>CHIARELIS</b> First Name	<b>RIVAS TORRES</b> Middle Name	Last Name
United States Bankruptcy Court for the:	<b>District of Puerto Rico</b>		
Case number (if known)	<b>24-04556-11</b>		

Check if this is an amended filing

## Official Form 106Dec

### Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

#### Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No  
 Yes. Name of person \_\_\_\_\_ Attach *Bankruptcy Petitioner's Notice, Declaration, and Signature (Official Form 119)*.

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ JOSE LUIS REYES AYALA  
JOSE LUIS REYES AYALA, Debtor 1

Date 10/31/2024  
MM/ DD/ YYYY

X /s/ CHIARELIS RIVAS TORRES  
CHIARELIS RIVAS TORRES, Debtor 2

Date 10/31/2024  
MM/ DD/ YYYY

Fill in this information to identify your case:

Debtor 1	<b>JOSE</b> First Name	<b>LUIS</b> Middle Name	<b>REYES AYALA</b> Last Name
Debtor 2 (Spouse, if filing)	<b>CHIARELIS</b> First Name <b>RIVAS TORRES</b> Middle Name      Last Name		
United States Bankruptcy Court for the:	<b>District of Puerto Rico</b>		
Case number (if known)	<b>24-04556-11</b>		

Check if this is an amended filing

## Official Form 107

### Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Give Details About Your Marital Status and Where You Lived Before

##### 1. What is your current marital status?

- Married  
 Not married

##### 2. During the last 3 years, have you lived anywhere other than where you live now?

- No

Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
Number Street	From _____ To _____	<input type="checkbox"/> Same as Debtor 1	<input type="checkbox"/> Same as Debtor 1
City	State ZIP Code	Number Street	From _____ To _____
Number Street	From _____ To _____	City	State ZIP Code
City	State ZIP Code	Number Street	From _____ To _____

##### 3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- No  
 Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Debtor 1  
Debtor 2

JOSE LUIS

CHIARELIS

REYES AYALA  
RIVAS TORRES

First Name

Middle Name

Last Name

Case number (if known) 24-04556-11

## Part 2: Explain the Sources of Your Income

**4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?**

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

 No Yes. Fill in the details.

	Debtor 1	Debtor 2		
	Sources of income Check all that apply.	Gross Income (before deductions and exclusions)	Sources of income Check all that apply.	Gross Income (before deductions and exclusions)
<b>From January 1 of current year until the date you filed for bankruptcy:</b>	<input type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	<u>\$236,233.00</u>	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	
<b>For last calendar year:</b> (January 1 to December 31, <u>2023</u> ) YYYY	<input type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	<u>\$528,622.00</u>	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	
<b>For the calendar year before that:</b> (January 1 to December 31, <u>2022</u> ) YYYY	<input type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	<u>\$606,777.00</u>	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	

**5. Did you receive any other income during this year or the two previous calendar years?**Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. No Yes. Fill in the details.

	Debtor 1	Debtor 2		
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross Income from each source (before deductions and exclusions)

**From January 1 of current year until the date you filed for bankruptcy:** \_\_\_\_\_

**For last calendar year:**  
(January 1 to December 31, 2023)  
YYYY

**For the calendar year before that:**  
(January 1 to December 31, 2022)  
YYYY

Debtor 1  
Debtor 2JOSE CHIARELIS LUIS REYES AYALA  
RIVAS TORRES

First Name Middle Name Last Name

Case number (if known) 24-04556-11

## Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

## 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$7,575\* or more?

No. Go to line 7.

Yes. List below each creditor to whom you paid a total of \$7,575\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

\* Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.

Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Dates of payment	Total amount paid	Amount you still owe	Was this payment for...
Creditor's Name			<input type="checkbox"/> Mortgage
Number Street			<input type="checkbox"/> Car
			<input type="checkbox"/> Credit card
			<input type="checkbox"/> Loan repayment
City State ZIP Code			<input type="checkbox"/> Suppliers or vendors
			<input type="checkbox"/> Other _____

## 7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

No

Yes. List all payments to an insider.

Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name			
Number Street			
City State ZIP Code			

Debtor 1  
Debtor 2

JOSE LUIS

CHIARELIS

First Name

REYES AYALA  
RIVAS TORRES

Middle Name

Last Name

Case number (if known) 24-04556-11**8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?**  
Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider.

Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Insider's Name			
Number Street			
City	State	ZIP Code	

**Part 4: Identify Legal Actions, Repossessions, and Foreclosures****9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

 No Yes. Fill in the details.

Nature of the case	Court or agency	Status of the case
Case title	Court Name	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case number	Number Street	
	City	State ZIP Code

**10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?**  
Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below.

Debtor 1  
Debtor 2

JOSE LUIS

CHIARELIS

First Name

MIDDLE NAME

REYES AYALA  
RIVAS TORRES

Last Name

Case number (if known) 24-04556-11POPULAR AUTO INC

Creditor's Name

1901 JESUS T PINERO AVE SUITE 435

Number Street

San Juan, PR 00920

City State ZIP Code

Describe the property	Date	Value of the property
2016 FORD 250 (TRANSIT)	8/2024	\$15,000.00

**Explain what happened**

- Property was repossessed.  
 Property was foreclosed.  
 Property was garnished.  
 Property was attached, seized, or levied.

**11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?**

 No Yes. Fill in the details.

Describe the action the creditor took	Date action was taken	Amount taken
Creditor's Name		
Number Street		
City State ZIP Code	Last 4 digits of account number: XXXX-_____	

**12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?**

 No Yes**Part 5: List Certain Gifts and Contributions**

**13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?**

 No Yes. Fill in the details for each gift.

Debtor 1  
Debtor 2

JOSE LUIS

CHIARELIS

Middle Name

REYES AYALA  
RIVAS TORRES

Last Name

Case number (if known) 24-04556-11

**Gifts with a total value of more than \$600 per person**

**Describe the gifts**

**Dates you gave the gifts**

**Value**

Person to Whom You Gave the Gift

Number Street

City State ZIP Code

Person's relationship to you

**14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?**

No

Yes. Fill in the details for each gift or contribution.

**Gifts or contributions to charities that total more than \$600**

**Describe what you contributed**

**Date you contributed**

**Value**

Charity's Name

Number Street

City State ZIP Code

**Part 6: List Certain Losses**

**15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?**

No

Yes. Fill in the details.

**Describe the property you lost and how the loss occurred**

**Describe any insurance coverage for the loss**

**Date of your loss**

**Value of property lost**

Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.

Debtor 1  
Debtor 2

JOSE LUIS

CHIARELIS

REYES AYALA  
RIVAS TORRES

First Name

Middle Name

Last Name

Case number (if known) 24-04556-11

## Part 7: List Certain Payments or Transfers

**16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?**

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

 No Yes. Fill in the details.

		Description and value of any property transferred	Date payment or transfer was made	Amount of payment
<b>The Batista Law Group, PSC</b>				
Person Who Was Paid		<b>PRE PETITION FEES \$3,000.00 RETAINER \$4,500.00 FILING FEES AND OTHER COSTS \$2,000.00</b>	<u>7/16/2024</u>	<u>\$9,500.00</u>
<b>239 Ave Arterial Hostos Ste 206</b>				
Number Street				
<b>San Juan, PR 00918-1475</b>				
City	State	ZIP Code		
Email or website address				
Person Who Made the Payment, if Not You				

**17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?**

Do not include any payment or transfer that you listed on line 16.

 No Yes. Fill in the details.

		Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid				
Number Street				
City	State	ZIP Code		

**18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?**

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property).

Do not include gifts and transfers that you have already listed on this statement.

 No Yes. Fill in the details.

Debtor 1  
Debtor 2

JOSE LUIS

CHIARELIS

REYES AYALA  
RIVAS TORRES

First Name

Middle Name

Last Name

Case number (if known) 24-04556-11**CARLOS PEREZ**

Person Who Received Transfer

Number Street

City State ZIP Code

Person's relationship to you

**Description and value of property transferred**

TRUCK-HINO 2013

**Describe any property or payments received or debts paid in exchange**

PAYMENT WAS APPLIED TO DEBT WITH GENERAL EQUIPMENT FINANCIAL \$25k

**Date transfer was made**MAY 2024**JESSICA RIVERA**

Person Who Received Transfer

Number Street

City State ZIP Code

Person's relationship to you

## TRUCK -2014 KENWORTH T370

## PAYMENT WAS APPLIED TO DEBT WITH GENERAL EQUIPMENT FINANCIAL, \$25k

MAY 2024**CHRISTIAN ALAMO**

Person Who Received Transfer

Number Street

City State ZIP Code

Person's relationship to you

## 2020 LEXUS XR

## DEBTOR SOLD VEHICLE TO MR CHRISTIAN ALAMO, HOWEVER TITLE HAS NOT BEEN TRANSFERRED.

MARCH 2024

**19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)**

 No Yes. Fill in the details.**Description and value of the property transferred****Date transfer was made**

Name of trust \_\_\_\_\_

--	--

Debtor 1  
Debtor 2

**JOSE**                    **LUIS**

**REYES AYALA  
RIVAS TORRES**

CHIARELIS

RIVAS TORRES

Case number (*if known*) **24-04556-11**

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

No

Yes. Fill in the details.

Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
XXXX- _____	<input type="checkbox"/> Checking _____ <input type="checkbox"/> Savings _____ <input type="checkbox"/> Money market _____ <input type="checkbox"/> Brokerage _____ <input type="checkbox"/> Other _____	_____	_____

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

No

Yes. Fill in the details.

Name of Financial Institution	Who else had access to it?	Describe the contents	Do you still have it?
Number   Street	Name		<input type="checkbox"/> No <input type="checkbox"/> Yes
	Number   Street		
	City                  State      ZIP Code		
City	State      ZIP Code		

**22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?**

No

Yes. Fill in the details.

Debtor 1  
Debtor 2

JOSE LUIS

CHIARELIS

REYES AYALA  
RIVAS TORRES

First Name

Middle Name

Last Name

Case number (if known) 24-04556-11

Who else has or had access to it?			Describe the contents	Do you still have it?
<hr/>			<hr/>	<input type="checkbox"/> No
Name of Storage Facility			Name	<input type="checkbox"/> Yes
Number	Street	Number	Street	<hr/>
<hr/>		<hr/>		<hr/>
City	State	City	State	ZIP Code
<hr/>				

## Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

 No Yes. Fill in the details.

Where is the property?	Describe the property	Value
<hr/>	<hr/>	<hr/>
Owner's Name	Number Street	<hr/>
<hr/>	<hr/>	<hr/>
Number Street	<hr/>	<hr/>
<hr/>	City State ZIP Code	<hr/>
City	State ZIP Code	<hr/>

## Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- *Environmental law* means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- *Site* means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- *Hazardous material* means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

 No Yes. Fill in the details.

Debtor 1  
Debtor 2

JOSE LUIS

CHIARELIS

REYES AYALA  
RIVAS TORRES

First Name

Middle Name

Last Name

Case number (if known) 24-04556-11

Governmental unit	Environmental law, if you know it	Date of notice
Name of site	Governmental unit	
Number Street	Number Street	
	City State ZIP Code	
City State ZIP Code		

## 25. Have you notified any governmental unit of any release of hazardous material?

 No Yes. Fill in the details.

Governmental unit	Environmental law, if you know it	Date of notice
Name of site	Governmental unit	
Number Street	Number Street	
	City State ZIP Code	
City State ZIP Code		

## 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

 No Yes. Fill in the details.

Court or agency	Nature of the case	Status of the case
Case title _____  Court Name		<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Number Street		
Case number  City State ZIP Code		

Debtor 1  
Debtor 2

JOSE LUIS

CHIARELIS

REYES AYALA  
RIVAS TORRES

First Name

Middle Name

Last Name

Case number (if known) 24-04556-11

## Part 11: Give Details About Your Business or Connections to Any Business

**27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?**

- A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
- A member of a limited liability company (LLC) or limited liability partnership (LLP)
- A partner in a partnership
- An officer, director, or managing executive of a corporation
- An owner of at least 5% of the voting or equity securities of a corporation
- No. None of the above applies. Go to Part 12.

Yes. Check all that apply above and fill in the details below for each business.

**DBA/JOSE L REYES AYALA**

Name \_\_\_\_\_

PO Box 9535

Number Street \_\_\_\_\_

CAGUAS, PR 00726

City State ZIP Code \_\_\_\_\_

**Describe the nature of the business**

TRUCK DELIVERIES

**Employer Identification number  
Do not include Social Security number or ITIN.**

EIN: \_\_\_\_\_

**Name of accountant or bookkeeper**

JOSE ALICEA

**Dates business existed**From 2008-2024 To \_\_\_\_\_**28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.**

No

Yes. Fill in the details below.

**Date issued**

Name \_\_\_\_\_ MM / DD / YYYY \_\_\_\_\_

Number Street \_\_\_\_\_

City State ZIP Code \_\_\_\_\_

Debtor 1  
Debtor 2

JOSE	LUIS	REYES AYALA
CHIARELIS		RIVAS TORRES
First Name	Middle Name	Last Name

Case number (if known) 24-04556-11

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**X** /s/ JOSE LUIS REYES AYALA  
Signature of JOSE LUIS REYES AYALA, Debtor 1

**X** /s/ CHIARELIS RIVAS TORRES  
Signature of CHIARELIS RIVAS TORRES, Debtor 2

Date 10/31/2024

Date 10/31/2024

Did you attach additional pages to your *Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

- No  
 Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

- No  
 Yes. Name of person \_\_\_\_\_

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Fill in this information to identify your case:

Debtor 1	<b>JOSE</b>	<b>LUIS</b>	<b>REYES AYALA</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<b>CHIARELIS</b>	<b>RIVAS TORRES</b>	
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<b>District of Puerto Rico</b>		
Case number (if known)	<b>24-04556-11</b>		

Check if this is an amended filing

## Official Form 122B

### Chapter 11 Statement of Your Current Monthly Income

12/21

You must file this form if you are an individual and are filing for bankruptcy under Chapter 11 (other than Subchapter V). If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

#### Part 1: Calculate Your Current Monthly Income

##### 1. What is your marital and filing status? Check one only.

- Not married. Fill out Column A, lines 2-11.  
 Married. Fill out both Columns A and B, lines 2-11.  
 Married and your spouse is NOT filing with you. Fill out Column A, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	<i>Column A</i> <b>Debtor 1</b>	<i>Column B</i> <b>Debtor 2 or non-filing spouse</b>
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	<b>\$0.00</b>	<b>\$0.00</b>
3. Alimony and maintenance payments. Do not include payments from a spouse.	<b>\$0.00</b>	<b>\$0.00</b>
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments you listed on line 3.	<b>\$0.00</b>	<b>\$0.00</b>
5. Net income from operating a business, profession, or farm		
Gross receipts (before all deductions)	\$39,372.16	\$0.00
Ordinary and necessary operating expenses	-\$28,669.83	-\$0.00
Net monthly income from a business, profession, or farm	<b>\$10,702.33</b>	<b>\$0.00</b>
	<i>Copy here →</i>	<i>\$10,702.33</i>
6. Net income from rental and other real property		
Gross receipts (before all deductions)	\$0.00	\$0.00
Ordinary and necessary operating expenses	-\$0.00	-\$0.00
Net monthly income from rental or other real property	<b>\$0.00</b>	<b>\$0.00</b>
	<i>Copy here →</i>	<i>\$0.00</i>

Debtor 1  
Debtor 2

JOSE LUIS REYES AYALA  
CHIARELIS RIVAS TORRES

First Name Middle Name Last Name

Case number (if known) 24-04556-11

**7. Interest, dividends, and royalties**

Column A Debtor 1	Column B Debtor 2 or non-filing spouse
<u>\$0.00</u>	<u>\$0.00</u>
<u>\$0.00</u>	<u>\$0.00</u>

**8. Unemployment compensation**

Do not enter the amount if you contend that the amount received was a benefit under

the Social Security Act. Instead, list it here: ..... ↓

For you..... \$0.00  
For your spouse..... \$0.00

**9. Pension or retirement income.** Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.

\$0.00      \$0.00

**10. Income from all other sources not listed above.** Specify the source and amount.

Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.

If necessary, list other sources on a separate page and put the total below.

\_\_\_\_\_ + \_\_\_\_\_ + \_\_\_\_\_  
Total amounts from separate pages, if any.

+ \_\_\_\_\_ + \_\_\_\_\_  
**\$10,702.33** + **\$0.00** = **\$10,702.33**  
 Total average monthly income

**11. Calculate your total average monthly income.** Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.

Part 2: Sign Below

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

X /s/ JOSE LUIS REYES AYALA

Signature of Debtor 1

X /s/ CHIARELIS RIVAS TORRES

Signature of Debtor 2

Date 10/31/2024  
MM/ DD/ YYYY

Date 10/31/2024  
MM/ DD/ YYYY

B2030 (Form 2030) (12/15)

United States Bankruptcy Court  
District of Puerto Rico

In re REYES AYALA, JOSE LUIS

RIVAS TORRES, CHIARELIS

Case No. 24-04556-11

Debtor

Chapter 11

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR**

1. Pursuant to 11 U .S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

**NO LOOK FEE**

For legal services, I have agreed to accept .....

Prior to the filing of this statement I have received .....

Balance Due .....

**RETAINER**

For legal services, I have agreed to accept and received a retainer of ..... **\$4,500.00**

The undersigned shall bill against the retainer at an hourly rate of ..... **\$350.00**

[Or attach firm hourly rate schedule.] Debtor(s) have agreed to pay all Court approved fees and expenses exceeding the amount of the retainer.

2. \$1,738.00 of the filing fee has been paid.

3. The source of the compensation paid to me was:

Debtor       Other (specify)

4. The source of compensation to be paid to me is:

Debtor       Other (specify)

5.  I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor' s financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;

B2030 (Form 2030) (12/15)

- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
7. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

10/31/2024

Date

/s/ Jesus Enrique Batista Sanchez

Jesus Enrique Batista Sanchez  
*Signature of Attorney*

Bar Number: USDC No. 227014  
The Batista Law Group, PSC  
Capital Center Building  
239 Ave Arterial Hostos Ste 206  
San Juan, PR 00918-1475  
Phone: (787) 620-2856

The Batista Law Group, PSC

*Name of law firm*